

NIH CHILD CARE BOARD MEETING MINUTES

December 11, 2003

Building 31 – Conference Room 7

9:30 a.m. to 12:00 p.m.

Members in Attendance:

Janet Austin, Debra Chew, Deborah Fountain, Alisa Green, Valerie Hurt, Susan Koester, Kim Plascjak, Henry Primas, Susan Reider, Mary Ellen Savarese, Lisa Strauss, Tim Tosten

Members Absent: Jayne Lura-Brown, Lynn Hudson, Juanita Mildenberg, Barbara Murphy, Qin Ryan,

Liaisons in Attendance:

ChildKind, Inc.: Wendy Sharp

POPI: Paulina Alvarado, Lucretia Berlinski, Martina Vogel-Taylor

ECDC: No representatives

Guests:

Judy Ashley/LifeWork Strategies, Inc., Nichole Queen/LifeWork Strategies, Inc.

I. Welcome and Introductions: Janet Austin began the meeting by welcoming members and guests.

II. Approval of Minutes: Members voted and approved the minutes from the October 30, 2003 meeting with the following noted amendment to agenda item VI – NIH and the Role of the Child Care Board:
“Integrating the services that are currently provided in a temporary building into a permanent structure.”

III. Presentation – NIH Child Care Resources and Referral / Waiting List Management Services: Judy Ashley, Executive Director, LifeWork Strategies, Inc. (LWS)

NIH Child Care Resource and Referral Service

- In 1999, the NIH identified a need to further assist their employees and contractors in finding child care alternatives that best suited them. This service would aid the NIH in recruiting and retaining the best and brightest to its workforce. Through a contract managed by the Work/Life Center, the Child Care Resource and Referral Service was established. Through visibility and promotion, there was a tremendous utilization of this service in the first year. LWS has gradually developed a relationship with many employees as their child care needs have changed over the past four years.
- **How the Child Care Resource and Referral Service works:**
 - Initial call by perspective parents to LWS.
 - LWS will complete a needs assessment on the type of child care they are looking for.
 - LWS searches a database that lists all licensed child care providers in the Washington Metropolitan Area. Listings in the database are updated quarterly. LWS sends materials to perspective parents on providers matching their child care needs (LWS may need to make at least 50 telephone calls to find 3 matches for infant care.).
 - LWS will conduct follow up calls to parents to see if further assistance is needed.

- LWS will ask parents to complete an evaluation of their services.
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- Utilization Rates: FY00 – 449, FY01 – 360, FY02 – 583 (during this year LWS was contracted to administer the NIH Child Care Wait List Management Program), FY03 – 617.
- Who the R&R Serves (as of 12/11/03): NIH Employees – 366, Post Docs/Fellows – 200, Contractors – 51.
- Request of Referrals by Ages of Children (as of 12/11/03):
 - Birth to 12 Months: 261 (40%), 12 to 18 Month: 52 (8%), 18 to 24 Months: 26 (4%), 24 to 36 Months: 77 (12%), 36 to 48 Months: 71 (11%), 48+ Months: 167 (25%) – Total of 617 cases serving 654 children.

Waiting List Management Program

- In April, 2002, the NIH identified the need to hire a neutral party to keep and maintain a comprehensive database of families on the wait list as a whole, and also separately for each of the NIH Child Care Programs to eliminate the perception of favoritism and elitism. Since LWS was already providing the Resource and Referral Services, they were hired to administer the NIH Child Care Waiting List Management Program. By allowing LWS to manage both services would provide employees a one-stop-shop for their child care needs.
- Total Number of Children on the Waiting List (as of 11/25/03): 961
- Supply vs. Demand (as of 11/25/03):

Ages Served	0 – 12 Months	12 – 18 Months	18 – 24 Months	24 – 36 Months	Preschool
Spaces Available for Children Under 5 yrs.	18	18	21	60	170
Children Currently on the Wait List	360	95	96	169	241

- Employment Representation by Category: NIH Employees – 519, Fellows – 217, Post Docs – 75, Other Federal Agencies – 149. Contractors are not entitled to utilize the NIH Child Care Programs however; they can utilize the Child Care Resource and Referral Service.
- Where Wait List Families Live: Maryland – 824 (86%), Virginia – 61 (6%), DC – 48 (5%), Other – 28 (3%). LWS will contact parents quarterly to make sure their information on file is up to date, and that they wish to remain on the waiting list.
- Highlights from Recent LWS Quarterly Report:
 - LWS makes every attempt to assist parents in understanding how the Waiting List Management Program works and the time that it may take for a space to become available, and has found that due to language barriers and cultural differences, many parents are overwhelmed by the process and become discouraged. LWS wonders if the NIH could assist these parents by providing a mentor who speaks their languages and possibly has

gone through the process of finding child care services that could coach these parents in finding care.

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- Parents will continue to be upset with LWS because they can not provide them with a number as to where they are on the waiting list. Because the waiting list changes on a daily basis, there too many variables that affect where a child's name is that day to provide a parent with a number. This is difficult for parents to understand.
- 99% of the time LWS receives positive feedback from parents on the waiting list.

Members thanked Judy Ashley for her informative presentation. Mary Ellen Savarese asked members to review the On-line Registration Form for clarity and context and provide her with any suggestions/comments on ways to improve the process.

IV. Approve Committee Revisions to the Child Care Subsidy Proposal: Janet Austin reminded members that the child care subsidy proposal should not include how or where the funding will be obtained. The proposal should identify what we want and why it is important. Mary Ellen Savarese thanked the members of the Subsidy Committee for reviewing the draft proposal and providing feedback. Along with the proposal, the Board will include a one-page Fact Sheet that identifies:

- What is a Child Care Subsidy?
- Cost
- Benefit
- Eligibility
- Administration
- Role of the NIH
- Two or Three questions or points about the subsidy

Members provided the following suggestions/comments on the Child Care Subsidy Fact Sheet:

- Include the question Why Should the NIH Provide a Subsidy?
- Include other DHHS agencies that offer a child care subsidy.
- Note that the subsidy will be disseminated on a first come first served basis.
- Note that the subsidy will only pay for a portion of an employee's overall cost for child care services. Include examples from other DHHS agencies.
- Revise the question "What is a Child Care Subsidy?" to say "This is a program for Federal Employees with a total household income of up to \$65,000.000 who meet specific eligibility requirements and place their children (age 12 and younger) in a licensed child care or registered family care setting while they are working full-time....."
- Revise the information for "Cost" to read "The total amount for the NIH Pilot will be \$50,000.000 in the first year, and capped at \$100,000.000 in the second and third year.

Members provided the following suggestions/comments on the Child Care Subsidy Proposal:

- Include comments how the NIH is currently supporting its employees as it relates to child care (NIH Child Care Programs and the Child Care Resource and Referral Service).

- Emphasize the fact that all child care within the Washington Metropolitan Area is expensive for people of low to moderate incomes. Include actual dollar amounts for child care and ranges of income.
- State that the NIH Child Care Programs do provide tuition assistance, but this can only help a very small number of families.

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- Emphasize that the subsidy opens options for employees utilizing any licensed child care centers and registered family care services.

V. Discussion – Board Presentation to Dr. Zerhouni/Dr Kington: Janet Austin informed members that her meeting with Dr. Zerhouni has been changed from December 18, 2003, to January 13, 2004. She along with Susan Koester and Mary Ellen Savarese will be meeting with Dr. Kington. Janet Austin asked members to identify key items/topics they would like discussed with Dr. Kington. Members identified the following items/topics:

- 1) Support and implement a NIH Child Care Subsidy Plan.
- 2) Support any Federal legislation that would broaden the Tribble Amendment that would give agencies the opportunity to explore community-based solutions for child care.
- 3) Provide clarification that all of NIH's researchers are allowed to utilize our child care services as just as they are allowed to utilize Transhare.
- 4) Ensure funding for the construction of the Northwest Child Care Center is not further delayed or taken off the docket. Funding was originally included on NIH's FY05 budget and has now been pushed to FY08.

VI. Discussion – Planning for the January Board discussion of Contractor Issues: Susan Koester shared with members that between A-76 and the loss of FTE's NIH-wide, Institutes are turning more and more to hiring people in contract positions to fill the void. In many situations there are contractors who have been working side-by-side with FTE's for many years. She will lead a discussion of this issue at the January meeting and asked for suggestions. Kim Plascjak indicated that within the language of the contracts will identify what types of benefits these individuals will receive or not receive from their companies. Henry Primas shared with members that within the blue-collar trades, most of the contractors are being paid \$8.50 - \$12.00 per hour, at the most. Mary Ellen Savarese indicated that members will need to have a discussion on the different categories of contractors. Debra Chew suggested the Board invite an expert on contracting to the January meeting. Other guests could include representatives from the Legal Advisory Office, Procurement Office, Claims and Employment Branch, and Labor Relations. Janet Austin summarized the discussion by suggesting that the Board's role may end up being educating the Contracting Officers to try and include some language about addressing child care proactively in the contracts.

VII. NIH Child Care Updates:

- Tim Tosten gave members 2004 Wellness Calendars and DOES pocket calendars as a thank you gift for all of their hard work for the past year.
- He is working on his FY05 & FY06 budgets and has asked members to e-mail him anything the Board feels they need to carry out their mission.

- DOES is preparing its business case for space for a child care center within the Rocksprings area that will be presented to the DHHS.

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VIII. Announcements:

- Debra Chew announced to members that she has taken a new position with FDA and this would be her last meeting. Members congratulated Debra and wished her the best in her new job.
- Mary Ellen Savarese asked the Membership Committee to revisit the applications they received over the summer to see if they can find a candidate interested in completing the remainder of Debra's term.
- Mary Ellen Savarese provided members with a copy of their revised 2004 Work/Action Plan and their Work Year.

IX. Adjourn: The meeting was adjourned at 12:05 p.m.

**The next meeting is scheduled for January 22, 2004
Building 31 – 6C/Room 6**

Prepared by:
Pamela Jenkins
January 12, 2004